APRIL 1974 FOURTEENTH YEAR - No. 157

# international review of the red cross



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# INTERNATIONAL REVIEW OF THE RED CROSS

**APRIL 1974 - No. 157** 

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## FRENCH EDITION OF THE REVIEW

The French edition of this Review is issued every month under the title of Revue Internationale de la Croix-Rouge. It is, in principle, identical with the English edition and may be obtained under the same conditions.

## SUPPLEMENTS TO THE REVIEW

**SPANISH** 

Conferencia Diplomática - Proyectos de Protocolos adicionales a los Convenios de Ginebra - Enumeración de actividades del CICR en 1973 - VI reunión regional de Cruces Rojas en Tegucigalpa - Ecuador - En favor de la población india de Amazonia.

#### **GERMAN**

Das Kriegsrecht in Serbien im Jahre 1877 - Diplomatische Konferenz über die Neubestätigung und die Weiterentwicklung des humanitären Völkerrechts - Überblick über die IKRK - Tätigkeiten 1973 - Zum Tode Carl J. Burckhardts Ehrenmitglied des IKRK.

#### INTERNATIONAL REVIEW OF THE RED CROSS

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#### THE LAW OF WAR IN SERBIA IN 1877

Although the Geneva Convention of August 22, 1864, for the Amelioration of the Condition of the Wounded in Armies in the Field has today only symbolic significance, its spirit lives still in the Conventions that were subsequently elaborated. It played, indeed, a capital role in the development of international humanitarian law and, in view of that fact, it may be appropriate to indicate in what way it exerted an influence that became increasingly stronger and that made itself quickly felt on the laws of various countries.

Some evidence of its effect is to be found in the rules of the law of war promulgated by Serbia a little more than ten years after the first Geneva Convention was signed. The text of these regulations, entitled Instructions issued by the Ministry of War of the Principality of Serbia concerning the Application of the Geneva Convention of August 22, 1864, and of the Rules of the Law of War, was recently discovered in Belgrade's archives of history. These instructions were published on 1 December 1877 and were to all officers and other ranks.

Besides the rules for the application of the first Geneva Convention, the instructions contain a notable outline of the customary law of war considered to be valid at that time. This summary will be judged to be highly in advance of its time if it is remembered that it was drawn up more than twenty years before the first Hague Conventions, which it foreshadows in many respects.

The Serbian rules of the law of war are of genuine historical value and we are certain that for our readers the selection of the articles <sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Translated from the Serbian by the ICRC.

reproduced here, illustrating a new attitude towards the victims of war and testifying also to the respect in which, in accordance with the instructions, the sign of the red cross was to be held, will be of great interest. We commence with article 4 of an eight-part commentary on the Geneva Convention, signed by the Minister of War.

(Ed.)

#### Aid to the wounded

§ 4.

Inhabitants of an enemy country who go to the aid of the wounded are entitled to all their rights, and their freedom is guaranteed. The presence of a wounded person receiving shelter and treatment in a house will ensure the protection of that house: soldiers may not be billeted in that house, the householder who has decided to care for the wounded is exempted from a portion of such contributions as may be levied in his town and, in such a case, the services he renders to the wounded and sick as well as his financial situation are taken into account. It is quite immaterial, of course, to which of the belligerents the wounded or sick whom this person has accepted to care for in his home belong. No attacks must be carried out on dwellings containing wounded or sick, unless the requirements of war necessitate such attacks, but even then, the safety of the wounded and sick in question must be ensured. However, a person who cared for the wounded in his house and, through that action, enjoyed the aforesaid privileges, lost those privileges from the moment it was established that he took unfair advantage of them by concealing in his own house spies or deserters.

#### **Preliminary provisions**

§ 6.

The laws of war concern everything that lies within the field of military operations; they define all the circumstances and all the acts that constitute the manner in which war is waged and determine the behaviour of belligerents in all the situations that are likely to arise in the course of hostilities. While recognizing to belligerents the right to annihilate each other, these rules prohibit all brutality, for torturing an enemy to death is not quite the same thing as wounding or killing him outright. Various laws therefore lay down what acts against an enemy are or are not permitted. They are founded on the general rule that in time of war the depth of suffering and the extent of the losses inflicted upon the enemy should not be in excess of that which is necessary to defeat his forces and that all persons should abstain from cruel and inhumane acts.

§ 7.

These rules may be violated only in extreme cases, or when they have already been violated by the enemy. But, under no circumstances should extreme necessity or military requirements be put forward as a reason if the injury inflicted upon the enemy has no direct relationship to the ultimate goal of the war, which is victory, and if that injury is in glaring contradiction with basic humanitarian principles.

#### Permissible and non-permissible means in wartime

§ 10.

Although it is permitted by the necessities of war to kill, to place hors de combat and to plunder the enemy, the right of belligerents to adopt means of injuring the enemy is not unlimited. First of all, it is not permitted to use excessively violent means which do not contribute in any way to the attainment of the ultimate goal of the war. Next, it is prohibited to employ means which are obviously useless and means which bring dishonour upon those who use them. The law of war forbids belligerents the use of such measures and refuses, at the same time, all protection to those who carry them out. Those who employ means of combat forbidden by the law of war must bear the consequences of such acts, for

the enemy may retaliate by having recourse to similar means and will thus increase the suffering and hardship of his own adversary.

§ 12.

In no circumstances can any justification be found for the use of poison, and people who do employ such means are held to be savages. The laws of war rigorously prohibit the use of poisoned weapons or the employment of poison, whether it is against an enemy army or within enemy territory. It is, in particular, prohibited to poison water supplies in enemy-occupied territory, to poison the enemy's food and to spread by any means whatsoever epidemics and contagious diseases. The employment of poison or contagion against the enemy is not only dishonourable but is also a double-edged weapon that can easily turn against those who resort to it.

§ 13.

Although war is an out-and-out struggle between belligerents, yet it must be conducted honourably. The enemy must be destroyed in open and fair combat. Consequently, it is prohibited by the law of war to kill an enemy brutally or by perfidious means. If, for instance, an enemy came to the camp under a flag of truce and on being brought before the commander-in-chief, killed him, this act would be considered as a perfidious and treacherous assassination and the guilty person would have to be sentenced to death. Similarly, it is forbidden by the law of war to kill an enemy who, having laid down his arms, has no means of defence.

§ 14.

It is not laid down that an enemy who is fighting to defend himself should not be killed; but, if he does not offer any defence, or begs for mercy, his life must be spared. Refusal to spare an enemy is only permissible if he has committed many acts of brutality, or if one's own life is at stake. He who does not spare an enemy cannot expect that enemy to be more merciful towards him than he himself has been. Even the refusal to show mercy to an enemy who has fought with valour is prohibited by the law of war.

§ 15.

Belligerents may employ any means which are justified by military necessity to reach the goals they have set themselves in going to war. Such means include: (1) the carrying out of all operations that would cause injury to the enemy; (2) the destruction and seizure of all that is indispensable to the enemy for the conduct of the war and the destruction of all objects liable to increase the enemy's fighting power: (3) the destruction of everything that might impede military operations; (4) the employment of ruses of war, subject to any pledges made to the enemy, in which case such pledges must be respected, for it is contrary to international law and proof of treachery not to honour promises made to the enemy; (5) the right of belligerents to employ all means to obtain information on the enemy; in this connection, if should not be considered that the laws of war have been violated when belligerents approach the subjects of the enemy in order to procure information on their adversary, provided they abstained, in such case, from applying coercion.

§ 19.

Open towns and localities, not defended by the army or by their inhabitants, must not be the object of sieges or bombardments. Only those towns and localities which have been fortified and defended by the army may be the object of such operations.

#### Enemy persons, combatants and non-combatants

§ 57.

All persons who fight with weapons under their government's orders are considered as enemy combatants. All other persons, including women, children and the aged may not be considered as active enemies. Those who wage war for their own account (pirates, marauders, etc.) are also excluded. Persons considered as active or recognized enemies are entitled to all the advantages

conferred upon them by the law of war. When captured, such persons may not be punished and may only be held as prisoners of war, while others (marauders, etc.) may be sentenced by a court-martial.

§ 58.

The following are considered as being combatants: (1) all the members of the regular land army; (2) of the navy; (3) of the people's army; (4) volunteers. Members of the people's army and volunteers are not considered as legitimate enemies unless: (1) they are organized in military groups with the authorization of the lawful government and under the command of recognized leaders; (2) they respect and apply the rules of the civilized law of war, when the whole nation is under arms; in such a case, citizens constituting the army must be considered as legitimate and official enemies, even though they may not possess a uniform, if it may be deduced from all the circumstances that the lack of uniform was not a means adopted to wage irregular and unfair warfare.

§ 60.

The following are considered as being non-combatants: (1) priests; (2) doctors, chemists, nursing orderlies and all those bearing the sign of the red cross or red crescent; (3) quartermasters, cooks and court clerks; (4) coffee-shop and restaurant keepers, suppliers, agents, etc.

§ 61.

People living peacefully in an enemy country (called passive enemies) who do not take an active part in the conflict and do not belong to the army are, it is true, victims of the general situation inevitably generated by a war and must bow before the superior strength of a victorious enemy. But they must never be considered as official enemies and must be treated accordingly. They must not be killed, tortured, ill-treated or led away into captivity, and it is forbidden to assail their honour or to lay hands on their property. The power that has emerged victorious from the war may not compel the inhabitants of the enemy country to serve in its army. The situation is different if those people volunteer to join the army.

# Persons taking part in the war, but not considered as recognized enemies

§ 62.

Those persons who go out singly or in bands to fight only with the object of looting and who have no link of any kind with the rest of the army are not considered as recognized enemies. At times they sally forth to fight, at other times they return to their homes to hide their loot. They are not entitled to the protection afforded by the law of war and may be tried by a court-martial. The same applies to marauders, deserters and spies.

# Ways and means to ensure application of the rules of the law of war and the right of recourse to reprisals

§ 83.

The application of the rules of the law of war is ensured by the following: (1) the consciousness of the mutual advantages that flow from such application; (2) the consciousness of an obligation that one bears towards the enemy, for a pledge made to an enemy must be honoured as strictly as one made to a friend; (3) the sentiments of justice and humanity which demand that everything be brought back to its true measure and which condemn useless acts of brutality; (4) in order to oblige the parties to the conflict to respect its rules, the law of war provides a means of redress known as "reprisals".

§ 84.

Reprisals consist of an act of retaliation against the enemy in respect of a violation committed by him against the law of war; they follow the old adage of "an eye for an eye and a tooth for a tooth". When one of the belligerents commits some excessive act against his adversary, the latter may retort in the same fashion, with the sharp difference that, having been provoked, he has acted

in accordance with the law of war, and the responsibility falls wholly on the party which started the provocation. If a party to the conflict employs against its adversary means that are excessively violent and inhumane, the latter has the right to take his revenge. The law of recourse to reprisals is the most brutal of the laws of war and should only be very rarely resorted to. It is important to find out exactly whether the law of war has really been violated by the enemy. The choice of the means of reprisals as well as their execution must, as far as possible, be equivalent or at least proportionate to the violations committed by the enemy. Extremely brutal and manifestly inhumane reprisals, exceeding in severity the enemy's acts, are considered as violations of the law of war.

§ 85.

Only commanders-in-chief have the right to order reprisals to be taken and they alone may lay down how severe they should be and how long they should last.

# INTERNATIONAL COMMITTEE OF THE RED CROSS

#### ASIAN SUB-CONTINENT

#### REPATRIATION OF 250,000 PERSONS

From September 1973 to March 1974, more than 250,000 persons have been moved from one side of the Asian sub-continent to the other in a vast operation involving the extensive co-operation of the ICRC. It was possible for this repatriation operation to be carried out only through the positive stand adopted by the three countries concerned and the co-operation shown by Switzerland, the United Nations High Commissioner for Refugees and the ICRC. Since the end of the Second World War, this is the most extensive repatriation operation undertaken by the ICRC, and its sheer size compels us to give in the pages that follow a summarized account of what has been accomplished? The relief efforts, though of considerable magnitude, undertaken by the ICRC since 1971 in support of prisoners, internees and civilians in the Asian sub-continent, will not be touched upon here, as they have been mentioned on several occasions in past issues of the *International Review*.

\*

Under the New Delhi Agreement signed on 28 August 1973, the Governments of India and Pakistan gave expression to their determination to seek a solution to the humanitarian problems resulting from the conflict of 1971. This Agreement, which had the concurrence of the Government of Bangladesh, provided for the

<sup>&</sup>lt;sup>1</sup> In charge of diplomatic negotiations relating to the operation betwen those three countries.

<sup>&</sup>lt;sup>2</sup> Plate.

#### INTERNATIONAL COMMITTEE

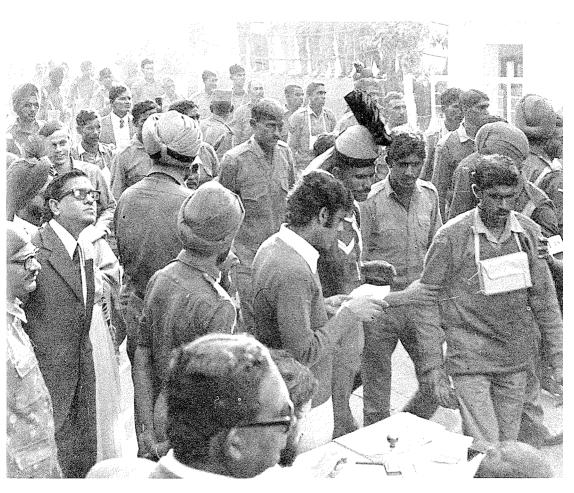
repatriation of: (1) all Pakistani prisoners of war and civilian internees in India (except for 195 pows alleged to be guilty of war crimes); (2) the Bengali minority in Pakistan; and (3) "a substantial number" of non-locals in Bangladesh. The three States concerned requested the ICRC's assistance to implement the provisions of the Agreement and repatriation operations were begun in September. At the same time, Bangladesh and Pakistan requested the United Nations assistance to facilitate the movement of the persons concerned between those two countries.

At the end of 1973, there were 57 ICRC delegates working in Pakistan, India and Bangladesh, assisted by more than 400 local staff, as the widely varied tasks, which the ICRC in Geneva and its delegates in the field were called upon to exercise, had expanded very rapidly. The ICRC was given the responsibility for carrying out the registration of persons wishing to go to Pakistan or Bangladesh, and it dealt with the transmission of lists of those persons to the Governments concerned. As for the actual transfer of people to those two countries, that was effected by an airlift on board aircraft chartered by the United Nations High Commissioner for Refugees. The latter wrote in the bulletin of March 1974:

In addition to the repatriation of Bengalis and non-Bengalis, the Agreement covered the return of prisoners of war to Pakistan. From the start, the three movements were concerned as being inter-linked and interdependent. If one of them failed, the other two would be automatically affected. UNHCR has no operational responsibility, however, in the prisoner-of-war leg of the triangle which is the concern of the Indian Government and the International Committee of the Red Cross. UNHCR is co-operating closely in this operation with the International Committee of the Red Cross, which is responsible for the registration and processing of the returnees prior to departure. The registration lists must be checked and approved by the receiving country in each case...

<sup>1 &</sup>quot;Non-locals" is the term used for those mostly Urdu-speaking Muslims who, at the time of the partition of British India in 1947, had opted to leave that part of the country that was to become the Republic of India in order to go to Pakistan. A second migration, to both East and West Pakistan took place following the first outbreak of hostilities between India and Pakistan in 1956.

# REPATRIATION IN THE ASIAN SUB-CONTINENT



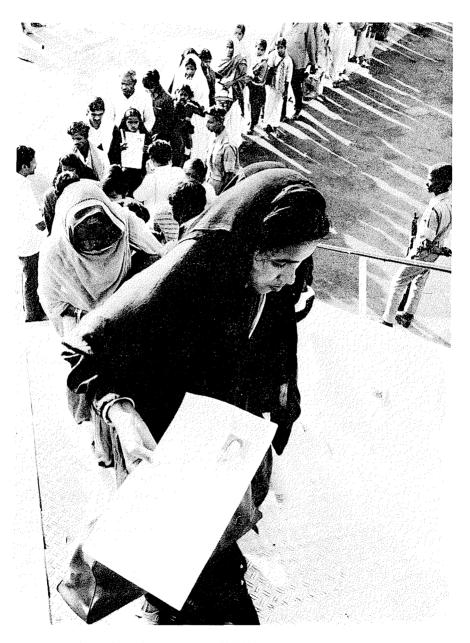
**Wagah,** November 1973. After being released, former Pakistani prisoners of war and civilian internees entering Pakistan across the India-Pakistan border, under the supervision of ICRC delegates.

Photo M. Martin/ICRC

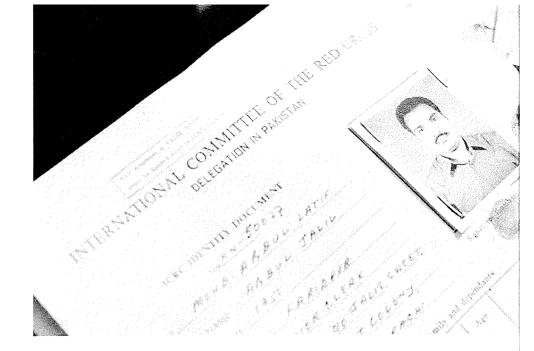


**Dacca** (Bangladesh). Persons cleared for repatriation to Pakistan receive from the ICRC their identity documents...

Photo Pulver/ICRC



... and board the plane chartered by the UNHCR.





Identity document issued by the ICRC  $\cdot$ 

Members of a Bengali family from Pakistan greeted in Dacca by local staff of the ICRC Central Tracing Agency.

Photos Bloomer/British Red Cross Society

#### India

The transfer from the camps to the India-Pakistan border is being carried out by rail. Trains carry prisoners of war and civilian internees, accompanied by ICRC delegates, at the rate of 800 persons every two days; the ICRC delegates supervise the smooth running of the repatriation operations and send a report on each to the Detaining Power and to the Power on which the detainees depend. From 28 September 1973 to the end of March 1974, the delegates accompanied 92 repatriation trains and supervised at the border check-post the repatriation of 62642 prisoners of war and 16975 civilian internees. Before leaving the camps where they were detained, each one of the prisoners of war and civilian internees had to complete a personal repatriation card. The cards, filled in according to the delegates' instructions, were to be sent to the Central Tracing Agency at Geneva, where they were filed in the Pakistan card index.

By the end of March, there remained in India several thousand prisoners and internees who will be repatriated under the same conditions as described above.

#### **Pakistan**

ICRC delegates assisted local authorities in Pakistan in charge of the preparatory work for the repatriation of the Bengali minority. Those persons cleared for repatriation had to be collected and taken to transit and departure camps. A sub-delegation of the ICRC had to be opened in Lahore and the number of delegates in Karachi was increased. Airlift terminals were set up in each of these places and, daily, delegates issued ad hoc identity documents to returnees, taken to departure points at the airports, prior to their leaving for Bangladesh.

All Bengali civilians wishing to return to Bangladesh were requested to apply for registration at the Central Tracing Agency bureaux, set up by the ICRC in various parts of the country. Applications by Bengali military personnel were registered by the Pakistan Government. All applications were then submitted by the ICRC to the Government of Bangladesh for clearance.

#### INTERNATIONAL COMMITTEE

By the end of March 1974, 62544 Bengali civilians and 53,879 Bengali military personnel, including members of their families, had returned, after receiving the documents issued by the ICRC, to Bangladesh by the UNHCR airlift. The repatriation operation of the remaining Bengalis wishing to return to Bangladesh, numbering a few thousand persons, is still proceeding and is expected to be wound up within the next few weeks.

#### Bangladesh

Since 1972, several hundred thousand persons, referred to in Bangladesh as "non-locals", expressed their wish to go to Pakistan. After the New Delhi Agreement, the ICRC has been as active here, as it was in Pakistan for those going in the opposite direction, for faciliting their repatriation. The procedure at both ends is the same, as regards the issuing of ad hoc identity documents prepared by the ICRC and the preparation of repatriation cards. In Dacca, and in other parts of the country where ICRC delegations were set up (Chittagong, Khulna, Ishurdi, Saidpur), the task of the ICRC has been, and continues to be, to aid the local authorities by co-operating extensively with them for the repatriation of nonlocals. The ICRC carries out the registration and notification of those persons cleared for repatriation by the competent Pakistan and Bangladesh authorities. Under the New Dehli Agreement, the Government assumes responsibility for the transfer of those persons to the exit camps set up at Dacca and Chittagong in which it is assisted by the ICRC. There each applicant is issued an identity document before boarding one of the aircraft chartered by UNHCR.

The ad hoc identity document is issued by the ICRC to persons requesting to be repatriated only after their files have been carefully examined and, in particular, after the granting of an entry visa into Pakistan has been checked. When the returnees arrive at their destination, their identity documents must be handed back to the ICRC delegates, who send them on to the Central Tracing Agency at

 $<sup>^{1}</sup>$  In addition, one ship completed 5 return voyages between Karachi and Chittagong.

Geneva. The exit cards prepared for each particular case are also transmitted to the Central Tracing Agency and are entered in the appropriate card-index.

Shortly after the start of the repatriation operations, an ICRC delegate described in a report the excitement surrounding travellers about to set off to start a new life in a distant land:

"Kilo Camp, a few kilometres outside Dacca, offers shelter to about one thousand persons and differs from all other camps sheltering non-Bengalis and Pakistanis in that, being very close to Dacca Airport, it has been recently turned into a transit camp. For the tens of thousands of non-Bengalis who have been living since the end of the war in temporary accommodation, it constitutes the final stage in the lengthy process leading to their departure."

This vast operation necessitated at the time it was in full action last December, the assistance of a large number of delegates and considerable local staff. The telecommunication network, too, between the various ICRC delegations had to be expanded. In Geneva, the Central Tracing Agency had to cope from September 1973 with a tremendous task: every month several tens of thousands of cards were received, examined, classified and entered by nationalities in card-indexes. In addition, replies had to be sent to numerous enquiries from various countries to persons reported missing or who had since been repatriated. At the end of 1973, the normal complement of the Agency had been reinforced by 15 additional staff.

To a large extent, the operation was accomplished under the auspices of the International Committee, with the aid of its delegates in the field as well as in Geneva and of the Central Tracing Agency personnel. It has been conducted successfully and the end is almost in sight. The *International Review* considers this a timely moment to give a broad outline of what has been achieved. But it could never have taken place without the co-operation of the authorities and National Red Cross Societies of the three countries of the subcontinent, without that of the High Commissioner for Refugees, and without the material and financial support provided by the

#### INTERNATIONAL COMMITTEE

Governments and National Societies of all the different countries that responded generously to the appeals launched by the ICRC and made available to it the means to carry out its mandates.

In conclusion, in order to give an idea of the exent of this operation, we give the following figures, made out until the end of March 1974:

- 62,642 prisoners of war and 16,975 civilian internees moved from India to Pakistan;
- 116,423 persons moved from Pakistan to Bangladesh;
- 68,045 persons moved from Bangladesh to Pakistan.

There are still 11 ICRC delegates in India, 8 in Pakistan, and 16 in Bangladesh.

#### IN GENEVA

## Death of Mr. Carl J. Burckhardt, Honorary Member of the ICRC

It was with deep regret that the International Committee learned of the death of Mr. Carl J. Burckhardt on 3 March 1974. When he was appointed a member of the International Committee of the Red Cross in 1933, Carl Burckhardt tirelessly worked with Max Huber, another eminent member and a former President of the ICRC. From November 1939, he devoted himself fully to ICRC activities and gave all his time and energy during the whole of the Second World War to the manifold tasks that had to be carried out.

It was vital during that period that the man at the helm should have a wide sweep of imagination and foresight. None other than Carl Burckhardt, as a strong and farseeing organizer and diplomat, earned the gratitude of countless human beings who escaped death from starvation or survived wounds and imprisonment.

At first, he was at the head of the department responsible for sending relief supplies to prisoners of war and civilian internees. Later on, he chaired the Joint Relief Commission representing the International Red Cross organizations responsible for channelling aid to civilians. A fleet of forty vessels was formed to carry relief under the protection of the red cross emblem, across seas infested with submarines. Again, it was Carl Burckhardt who secured a partial lifting of the allied blockade so as to bring relief to the starving civilian population of war-ravaged countries. He played a prominent part in the lengthy and difficult negotiations that had to be undertaken, and it was he, too, who worked out the agreements which, in Greece, led to the organization of regular assistance to over one million persons during the occupation.

Vast as this relief work was, it was nevertheless conducted parallel to action for the protection of war victims, in particular by watching over the observance of the Geneva Conventions. Some of the steps taken by Carl Burckhardt were of vital importance and, in retrospect, would seem to demonstrate the victory achieved, however late, over the powers of destruction. This is most evident if one views his vigorous action at the end of the war, when he went to see the leaders of the Third Reich in person and extracted from them concessions regarding political deportees.

He was at all times alive to his own responsibility towards the ICRC and, through that institution, towards all those in pain and suffering. When he was elected President of the ICRC, in December 1944, he uttered a phrase which sheds light on, and is characteristic of, the significance of his commitment: "It is up to us, by giving of our very best, to play our part in carrying the torch handed to us and, when night falls, watch over its flame and pass it on." Some months later, he ceased his presidential functions and kept, until 1948, the office of "President on leave".

On his seventieth birthday, in 1961, he was awarded the ICRC gold medal. In 1965, when he asked to be released from his duties, he was appointed an honorary member of the institution he had served for so long.

Carl J. Burckhardt had ample opportunity to put to good use, in the work of the Red Cross, his sense of active humanism and his keen and highly developed intelligence which enabled him to grasp the essentials of any subject immediately. If the Red Cross permitted him to deal with practical problems in his own way, it owes him still more for his devotion and for the exemplary service which he rendered to the humanitarian ideal. His memory will be faithfully cherished by the grateful International Committee.

#### Accessions to the Geneva Conventions

The International Committee of the Red Cross has received from the Federal Political Department in Berne a communication informing it that the Ministry of Foreign Affairs of the Sultanate of Oman, in its letter of 23 January 1974, has notified its accession to the four Geneva Conventions of August 12, 1949.

This accession takes effect from 31 July 1974.

The International Committee has also received from the Federal Political Department in Berne a communication informing it that the Republic of Guinea-Bissau, in its letter of 26 February 1974, has notified its accession to the four Geneva Conventions of August 12, 1949. This accession contains a number of reservations.

#### The Protection of Prisoners of War

Before the existence of the Red Cross and the Geneva Conventions, any soldier fallen into enemy hands was entirely at his captor's mercy. Now the Third 1949 Geneva Convention relative to the treatment of prisoners of war—recognized by 133 States—clearly lays down how he must be treated during captivity.

In order for prisoners of war to be protected effectively, their treatment must be open to supervision. It is for that reason that Article 126 of the Third Geneva Convention authorizes Protecting Power representatives to go wherever prisoners of war are held. The delegates of the ICRC have the same prerogative.

How do ICRC delegates carry out a visit to prisoners of war? What does their report cover? What use is made of that report?

The visit procedure includes a preliminary talk with the camp commandant, a general visit in the company of representatives of the authorities, talks in private with prisoners, and a final discussion with the commandant and his staff.

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The preliminary talk enables the delegates to establish confidence and explain the nature of their visit which is in no way an inspection or an enquiry. Its purposes is to provide relief and comfort to prisoners of war and to help the detaining authorities to discharge their treaty obligations.

During the initial contact with the commandant, the delegates note the figures and the details of the camp organization, which are included in their report: number and nationality of prisoners, appropriations for food, medical staff, family visits, mail, deaths, escapes, transfers and other information which varies from case to case.

The general visit of the camp, usually with the commandant or his adjutant, should permit the delegates to see all premises occupied by the prisoners and to form an idea of the material conditions of captivity. They examine the general appearance of the prisoners of war, the degree of occupation of their quarters, the sanitary facilities available to them, the kitchen, and so forth. The doctor-delegates give their attention to the medical facilities, the running of the hospital or infirmary, and the prisoners' state of health. During this tour of the camp, the delegates interview prisoners. Their right to talk in private with the prisoners is laid down in the Third Geneva Convention.

The delegates discuss with the prisoners' representatives and also with prisoners of their own choosing. They may interview any prisoners wishing to make personal requests. In the course of these talks, the prisoners describe detention conditions and air their compaints.

Although delegates are in no position to carry out a thorough investigation into serious incidents arising out of friction between prisoners and guards or among the prisoners themselves—and such incidents do sometimes cause deaths or serious injuries—they can record the prisoners' version of the events and in some cases conduct a medical examination.

During the final interview—the last phase of the visit—the delegates convey their impressions to the commandant, who may offer his comments and explanations. They endeavour to settle problems on the spot, wherever reference to higher authority can be avoided.

Where incidents have occurred, the commandant's version—like that of the prisoners—will be included in the delegates' report to the ICRC. If the event was sufficiently serious, the delegates demand that the Detaining Power institute an official enquiry, in accordance with Article 121 of the Third Convention, and report to the ICRC.

The delegates' report on their visit, containing information supplied by the authorities and by the prisoners, as well as the delegates' own findings, is sent to the ICRC for scrutiny and forwarding to the Detaining Power and the prisoners' own government.

If a government wishes to publish reports, it must publish in full, without any change, all reports on a series of visits, and not merely isolated reports. The ICRC has always strongly deplored the use of its reports in disputes which cannot but disserve the persons whom the ICRC seeks to protect.

## INTERNATIONAL ASSISTANCE OF THE RED CROSS IN INDO-CHINA

On 18 March 1974, the President of the Executive Council of the ICRC, Mr. R. Gallopin, the Secretary General of the League of Red Cross Societies, Mr. H. Beer, and the Director of the Indo-China Operational Group, Mr. O. Stroh, sent the following circular letter to National Societies:

In sending you the latest progress report of the Indo-China Operational Group we wish to take the opportunity of announcing a change in responsibility and organization.

It will be recalled that, in the perspective of a ceasefire in Vietnam and the further steps which might follow towards peaceful developments in Indo-China, the International Committee of the Red Cross and the League of Red Cross Societies decided, in December 1972, to establish an integrated staff called the Indo-China Operational Group (IOG) under the direction of Mr. Olof Stroh, Secretary General of the Swedish Red Cross. Its tasks were to mobilize and co-ordinate the employment of the full resources of the Red Cross in order to assure the most effective protection and assistance to those in need in the war affected areas.

The following factors now prompt the ICRC and the League to modify these arrangements. Firstly, the general situation in some areas has stabilized. Secondly, the plans and programmes which are capable of being implemented within the present financial perspectives are now well under way and the pattern of co-operation with the various Red Cross organizations in Indo-China is firmly established. Finally, pressure of work in connection with his normal duties will compel Mr. Stroh to withdraw as Director of the IOG on 31 March 1974.

Accordingly it has now been agreed that, with effect from 1 April 1974, the responsibilities hitherto undertaken by the Director IOG will be exercised by the Directors of Operations of the ICRC and the League. The two Institutions will resume their normal responsibilities so far as the Democratic Republic of Vietnam, the Republic of Vietnam and the Kingdom of Laos are concerned; in the Khmer Republic the integrated activities of the International Assistance of the Red Cross under ICRC responsibility will continue for so long as the situation makes this desirable. Overall policy concerning material assistance will be formulated by the existing ICRC/League Co-ordinating Body, to which Mr. Stroh will be co-opted when it meets to discuss matters concerning Indo-China.

It must be emphasized that this internal reorganization and redistribution of responsibilities will not affect the vigorous prosecution of international Red Cross plans and programmes for assistance; it is merely a reflection of the determination of both Institutions to adapt their methods and organization to a changing situation.

To this end, and in order to ensure the closest possible coordination and co-operation, an integrated IOG staff will continue to serve both Institutions thus assuring full continuity and preserving the detailed knowledge and expertise built up since December 1972. Furthermore, despite the change in direction and the redistribution of responsibilities it will, for the sake also of adminisstrative and practical convenience, continue to be known as the IOG and correspondence and communications will continue to emanate from and be addressed to the IOG as hitherto until such time as the structure outlined above may need to be adapted to further changes in the situation.

## SIXTH REGIONAL MEETING OF RED CROSS SOCIETIES IN TEGUCIGALPA

The Sixth Meeting of Presidents and Technical Seminar of the National Societies of North America, Mexico, Central America and Panama was held in Tegucigalpa, Honduras, from 29 January to 11 February 1974. This year's meeting, which was organized by the Honduran Red Cross under the patronage of the League of Red Cross Societies, followed up the one held in Panama in 1972. Its purpose was to strengthen personal contacts between leaders of National Societies in that part of the globe and set up programmes common to all Societies. Delegates were sent by the following National Societies: Costa Rica, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama and the United States.

The inaugural session was attended by the Head of State of Honduras, who welcomed the participants. Mr. J. Barroso, Chairman of the Board of Governors of the League, Mr. S. Nessi, Delegate-General of the ICRC for Latin America, and Mr. Ruben Villanuevo Doblado, President of the Honduran Red Cross, addressed the meeting on the various problems which the Red Cross is called upon to solve in the world of today. At the plenary sessions and the technical seminars which followed, the delegates examined several important questions on the agenda, including the following: action taken on the resolution adopted at the Fifth Meeting; sociological aspects of the migration of rural populations in so far as they affect National Society activities; setting up of training centres for Red Cross personnel; plans for action in the event of disaster.

At the first plenary session, Mr. Nessi outlined the ICRC's current activities, in particular in Latin America, and, at the meeting of Presidents, introduced the item on the agenda entitled "The Red Cross and internal conflicts and disturbances". This gave rise to a lively discussion which ended in the conclusion that National Societies, while they are able to co-operate extensively and fruitfully with the ICRC, cannot in general take action beyond certain

limits. It was recognized that the ICRC had to continue its work for the benefit of victims of these internal conflicts or disturbances, including political detainees.

The Sixth Meeting of Presidents and Technical Seminar decided, at the close of their deliberations, that the venue of the Seventh Meeting would be Managua and adopted the following resolutions, some of which, of direct interest to the ICRC, are given below: <sup>1</sup>

"The Sixth Meeting of Presidents and Technical Seminar of the National Societies of the USA, Mexico, Central America and Panama decided:

**Resolution 11**—To express its gratitude to the International Committee of the Red Cross for its interest in the development of the National Societies in the area and for the material aid it has given them, both in respect of their programmes of assistance and their preparation for cases of emergency.

**Resolution 12**—To recognize the humanitarian work of the International Committee of the Red Cross in favour of victims of international conflicts, internal conflicts and disturbances and internal tensions.

To recommend the National Societies to support all the efforts and initiatives of the International Committee of the Red Cross in such situations.

Resolution 13—To recommend the National Societies to intensify their approaches to their respective governments with a view to obtaining the compliance of these governments with the obligations incumbent upon them in virtue of the four Geneva Conventions of 1949 and the widest possible dissemination of these Conventions in school curricula and military training syllabuses.

To recommend the National Societies to inform the International Committee of the Red Cross regarding the results of their approaches.

Resolution 14—To recommend that those National Societies which have not yet done so take steps to acquire radio communication equipment, through the intermediary of the International Committee of the Red

<sup>&</sup>lt;sup>1</sup> Original Spanish.

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Cross, so that they can use the frequencies allotted to the ICRC by the International Telecommunication Union to establish contact between themselves and with the institutions of the Red Cross in Geneva.

**Resolution 15**—To ask the ICRC to appoint a delegate to visit each country in the area for the purpose of training National Societies staff in the organization and handling of tracing services.

## SIXTH CONFERENCE OF ARAB RED CRESCENT AND RED CROSS SOCIETIES

This regional conference, organized by the Kuwait Red Crescent Society, was held in Kuwait from 11 to 14 February 1974. It was attended by representatives of the Societies of the following thirteen countries: Algeria, Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauritania, Saudi Arabia, Sudan, Syria and the People's Democratic Republic of Yemen. The League was represented by its Secretary General Mr. Beer and by Mr. Kiamouch, the regional officer for North Africa and the Near East, while the ICRC was represented by Mr. P. Gaillard, Deputy Director, and Mr. J.-P. Hocké, Director of Operations.

The conference dealt with items such as the follow-up of the recommendations of the Conference held in Amman in 1973; an Arab institute for the training of volunteers; co-operation in providing first-aid and other humanitarian services during the pilgrim season, and consideration of increased financial aid for the ICRC. Discussions also focused on work in the field of international humanitarian law, in the context of the Diplomatic Conference to be held in Geneva, and ICRC activities in the Indian sub-continent and the Philippines.

The question of the dissemination of the Geneva Conventions was also studied by the participants, who welcomed the ICRC's

endeavour to publish documents relating to the Conventions as far as possible in Arabic, and expressed the hope for intensified action in a recommendation reading thus:

"The Conference recommends that Arab National Societies should do their best and utilize their full capacity for the spreading of the International Humanitarian Regulations and the Geneva Conventions on a wide scale, due to the importance of circulating such regulations and making them known to everybody for the sake of human benefit."

Another recommendation, which we also quote, relates to the financing of the ICRC:

"The Conference, taking into consideration the basic role of the International Committee of the Red Cross in giving direct help to the victims of war, especially in the Middle East and the Indian sub-continent, and in the development of the International Humanitarian Regulations.

Also taking into consideration that all parties to the Geneva Conventions are obliged to give financial support to the Committee to enable it to continue with its commission.

Exhorts all Arab Governments to give a yearly financial help to the Committee as previously requested by the resolution of the XXIInd International Conference of the Red Cross, held in Teheran in November 1973;

And asks the National Societies to help in this respect by approaching their governments, so that we can all support the efforts exerted by the ICRC."

The representatives of the Arab Red Crescent and Red Cross Societies adopted eight resolutions on various subjects discussed. It was decided that the next meeting would be held in Saudi Arabia and organized by that country's Red Crescent Society.

#### WORLD RED CROSS DAY

Every year, on 8 May, National Societies commemorate Henry Dunant's birthday. The activities of the Red Cross, Red Crescent or Red Lion and Sun Society concerned are then publicized as widely and vividly as possible. By proposing *Give blood—save life* as the theme for 1974, the League of Red Cross Societies is stressing the importance of the free gift of blood as a practical symbol of human solidarity. Moreover, a resolution adopted by the XXIInd International Conference of the Red Cross last year:

affirms that a service based on voluntary blood donation, motivated by humanitarian principles, is the safest and most effective way of supplying blood needs,

urges the Governments of all nations to adopt the highest standards in providing a safe blood service to their citizens, and to formulate those standards on the concept of non-remunerated blood donation,

recommends to each National Society and its Government that they undertake a strong combined effort to attain the humanitarian objectives of a total national blood service based on the broad voluntary participation of the people.

The League has prepared a document kit which, in addition to messages from leaders of various international institutions, contains statements by directors of blood transfusion services in different countries. To this the League has added information regarding the recruitment of blood donors and photographs depicting the activities of a number of National Societies in this field. We reproduce below a League editorial entitled "Blood is red all over the world" and hope that this World Red Cross Day may be as successful as it has been in preceding years.

One gesture—holding out the arm to give blood—is enough to save a life threatened by serious illness or by the consequences of an accident.

All over the world millions of men and women regularly make this gesture, which "does not hurt", takes little time and only has its full meaning if it is anonymous and entirely voluntary. It has one aim only: assistance to anyone in danger of death, and this without any discrimination, but with the assurance that the blood given is made available to the receiver free of charge.

Simple in itself and within the possibilities of everyone, provided they are in good health, this act of genuine generosity and profound solidarity—of which every donor is readily aware and which gives him real satisfaction—provides an opportunity, and such are few and far between, of giving direct and immediate assistance as in most cases the blood is given to someone else in a very short time.

Such a gift is truly in line with one of the Red Cross principles: to relieve suffering, without discrimination as to nationality, race, religious beliefs, class or political opinions. It is clear that the Red Cross, whose purpose is to protect life and health, had to participate in this fundamental action.

Its role in blood donor recruitment is important and vital. In addition the Red Cross has always and everywhere supported the concept that blood must be given and received free of charge, as any commercialization in this respect runs counter to its doctrine.

The present world needs for blood are enormous. This can continually and very easily be proved. It is in the first place due to the development of modern medical techniques, making it possible to save more lives than in the past. It is also related to the growing number of accidents of all kinds, caused by the progress which, on the other hand, benefits mankind to a greater or lesser degree. These needs unfortunately increase much faster than the supply of available blood. It is therefore essential and urgently necessary to redouble the efforts made so far by all specialized organizations, including the Red Cross, both at national and international level.

An attempt must therefore be made to improve on past results, and tribute should be paid to all those throughout the world who have understood the importance of their gesture and make it on a regular basis. Their number ought to be doubled, tripled or even further increased in certain countries.

No organization is better placed than the Red Cross to launch a world campaign aimed at promoting this indispensable gift of blood

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as, through its impartiality and freedom of action, it wins confidence and arouses universal generosity and solidarity.

The Red Cross hopes that this campaign of a universal character, launched on World Red Cross Day, will not be just a passing event, but that it will become a permanent action directed at arousing public opinion, thus contributing to meeting the blood needs in all countries.

On the occasion of World Red Cross, Red Crescent and Red Lion and Sun Day 1974, all men, whoever they may be and not only those close to our movement, are urged to respond to the appeal "GIVE BLOOD—SAVE LIFE". No matter by whom, to whom and where the blood is given, the only thing that counts is saving life, the life of a stranger who will no doubt always remain so. Is blood not red all over the world?

#### CHILD HEALTH AND WELFARE POLICIES

Recently, the Director-General of the International Children's Centre, Dr Etienne Berthet, gave a particularly valuable lecture at the Lisbon Child Welfare Association. The Centre's Courrier has reproduced the text of his lecture, 1 from which we have taken extensive passages. The subject is of special importance for the Red Cross, which has set up and continues to organize in numerous countries dispensaries for pre-natal consultation, mother and child care centres, preventoriums, orphanages, children's polyclinics. In these centres, doctors, nurses and social assistants are at work, under the sign of the red cross, red crescent and red lion and sun.

From time immemorial, and in every country throughout the world, men have felt concern for the inequalities which exist, right from the moment of birth, and become more and more marked throughout life. It is, however, only in recent years that various nations have become really aware of their responsibilities and have taken concrete measures to find solutions to the misery experienced by children throughout the world, for whom hunger, sickness, ignorance and hardship still form part of the everyday pattern of life.

The causes of such misery are too deep to be removed by the simple provision of food and medicine, and however great a generosity is shown, it is likely to prove fruitless if it is confined to temporary assistance and fails to tackle the heart of the problem.

It has been said, and quite rightly too, that the efforts made by a nation to help its children are the most reliable indication of its development, as they call not only for a high material and cultural level, but also for considerable moral qualities. The protection of children and the young generation closely follows the

<sup>&</sup>lt;sup>1</sup> Paris, Château de Longchamp, January-February 1973, No. 1.

social and economic development of the countries concerned. In a great many countries, this work has met with serious financial and technical difficulties owing to the lack of resources and qualified staff, and to the resistance of populations which, either through ignorance or unconcern, resist the measures designed to protect them.

This awareness of responsibilities has taken concrete shape in the "Declaration of the Rights of the Child", which was unanimously accepted by the General Assembly of the United Nations on 20 November 1959.

In its ten articles, the Declaration of 20 November 1959 recognized that the child, in view of his lack of physical and intellectual maturity, must be given special attention and care; that he is entitled to good health and education, to emotional and material security, and to respect and protection without any discrimination of any nature. The Declaration states, moreover, that these rights engage the responsibility of all those who are concerned with his protection and education, and, of course, in the first place, the responsibility of the parents.

The Declaration is an expression of the current thinking in respect of children. It does not put forward any original doctrine, nor does it set out any new schemes, but it does mark an awareness and a desire for action which should guide the work being done for child welfare in all countries of the world.

The essential difficulty is getting mankind to understand and implement this new policy; the latter should not simply be the subject of declarations of intent, but thorough studies and concrete work. With these aims in mind, the United Nations Children's Fund organized in April 1964, at Bellagio (Italy), a round-table discussion on "future plans for child welfare in the developing countries". This conference was attended by planners and specialists in child welfare, and by representatives of the specialized agencies of the United Nations and the International Children's Centre.

This new trend in child health and welfare policies posed the problem of its incorporation in the economic and social development plans of the various countries. "It is a fundamental problem of doctrine and principle. For example, in the initial phase of determining development programmes, priority is normally given to the

production of wealth. But in reality it is essential, whilst following an economic policy aimed at adapting the country to the modern world, to pay due consideration to man himself. Indeed, the man of tomorrow is the child of to-day. This is why the welfare of children and the young generation is important in any balanced development programme " (R. Debré).

The fundamental idea which emerged from these multi-disciplinary contacts is that whilst economic growth is a pre-requisite for development, it is not sufficient by itself. The aim of any economic effort is to foster mankind's interests, which presupposes a real awareness of his fundamental needs, priority being given to the most delicate and vulnerable groups: mothers, children and the young generation in general.

The result of all of these exchanges was to give a new dimension to the policy of child welfare in the present-day world. It took a wider and deeper dimension, and its objective became not simply to combat sickness, reduce the death rate and number of persons suffering from disabilities, but also to prepare the child for life, his integration in the world of adults, and to overcome the various physical, mental and social incompatibilities which threaten him.

The child should always be considered in all his complexity and from all aspects of his personality: biological, psychological and social—and none should be neglected for the sake of the others. There is a close interdependence between the physical and mental development of the child on the one hand, and his ability to acquire knowledge and professional integration on the other.

The complexity of the problems which arise in connection with child welfare requires team-work, in which each member contributes the information gained through his technique and analyses; the team must include doctors, nutrition experts, sociologists and psychologists, educationalists and experts in demography, economists and town planners, administrators and politicians.

All of the problems raised by the development and protection of children and adolescents are complementary and interrelated. They cannot be dissociated, and must be dealt with from an overall approach which takes into account all aspects of their personality (biological, psychological and social aspects), at all ages (from conception to integration in the adult world), in all the environments

in which they are to live (family, school, professional and social). This overall approach can be achieved only by regrouping and coordinating the efforts made in the various branches of human activity which are related to health and social welfare, education and occupational training.

Although the task of the doctor is to be a good practitioner of medicine, it must not be forgotten that to be a good practitioner requires not only a perfect knowledge of the preventive, clinical and therapeutic aspects of sickness, but also of their emotional, family, social and economic aspects. Today, the doctor must not only combat sickness but also prevent it and do everything possible to promote health, which should be understood as the harmonious and balanced development of all human abilities.

Whilst the school-teacher's task is to teach children, he must also be concerned with what they will do with their knowledge, and prepare them for a happy family, professional and social life. The school-teacher must contribute to "building the man", which according to Montaigne means "giving children a good head, rather than a full head"; this presupposes a knowledge of the pre-requisites for this: a healthy body and mind.

Whilst the economist's task is to draw up development plans, he must not forget the interdependence between the economic and social aspects, and similarly he must know that "the greatest wealth of a country is its people, expressed in quantity and appreciated in quality; it is a great force if everything is done to keep it healthy, enable it to acquire knowledge, work and develop its abilities to the maximum; it is, however, a great weakness, if, for any reason, man cannot find in his environment the means of full development, not only physical but also psychological and social" (A. Sauvy).

Medicine and social or educational work are activities which know no frontiers. This does not mean that the doctor, social worker and child specialist may possess the sum total of knowledge required to cover all of the aspects of the personality of the children whom they are tending; it does, however, mean that they have a duty, when they are working on the boundaries of their own specific field, to ask for help from any technical staff who may be able to complete and put a finishing touch to their work.

After mentioning the planning work undertaken since the end of the Second World War in connection with child health and welfare, and the problems caused by the shortage of qualified staff in all branches relating to health, education and social welfare, the author discusses the trend of child health and welfare policies in coming years.

..." Whilst it is essential to continue the measures against the scourges which have afflicted humanity for thousands of years (indeed, carelessness in a vaccination scheme may well result in the re-appearance of a contagious disease), there will be new problems arising over the next ten years to which we must devote our attention.

#### Already today we may mention six of these:

1. The population explosion and rise of the younger generations with all their requirements in respect of health, education, professional training and social work. In 1970, there were in the world 1,200 million children under 15 years of age. In 1980, according to United Nations forecasts there will be more than 1,500 million, which represents more than 40% of the total population.

The confidence which certain people place in a general policy based on the widespread use of contraceptives as the sole means of birth control does not seem realistic. Such a policy will be effective only if accompanied by an improvement in the cultural, economic and social level of the population concerned. Experience in the developed countries, states a UN document, tends to prove that the attitude of people to the size of the family begins to change only when the economic and social conditions as a whole have improved, and when it is realized that having too many children is likely to harm the well-being of the family instead of improving it.

2. The increased rate of scientific and technical progress in all fields of biology, psychopedagogy, and sociology will force us to revise our concepts and approaches to the problems. The resultant elimination of natural selection will increase the number of the physically and mentally handicapped.

- 3. The destruction of the traditional family structures will have an all the more marked effect on adolescents seeing that in the majority of developing countries there are no welfare centres which deal with the professional or cultural and social aspects.
- 4. Town development, industrialization and population movements are, because of the mental stresses which they cause, factors which give rise to social incompatibility—affecting first of all the young generations.
- 5. The new dangers of pollution of the environment, atmosphere, water, earth and food, owing to chemicals or radioactive fall-out—and the latter constitutes a particular threat because of its effects on the genetic heritage.
- 6. The advancement of our knowledge of the structure of living matter, which will perhaps enable us in the future to influence the pattern of human reproduction—with all the dangers which may result from such action."

In his conclusion, Dr Etienne Berthet stresses the need for technical co-operation on an international scale with a view to providing child health and welfare assistance in the developing countries.

... "Just as there is the notion of the "economic cost" of progress, there is the notion of the "social cost", to which we must devote our attention. For many men, the sacrifice of their cultural and religious attachment seems to be too high a price to pay for an improved material well-being. For example, in certain areas referred to as "under-developed" there is a high degree of well-being and happiness, although these differ very considerably from our western standards; any alteration to their way of life may well give rise to individual and collective unrest. Each phase in the development of a society always has a negative side and a positive side which we must not underestimate. Is it not true that the disappearance of a certain tradition, or a change in a given social structure can lead to much more serious trouble than that which we are striving to remove?

For this reason, international technical co-operation should be confined to well-proven techniques with which it is familiar and experienced, and must not cut across all of the religious, cultural and moral values, which differ according to the civilizations concerned and constitute a field in which it is difficult to be certain of the truth. Material well-being and happiness are two different notions. We know that technical civilization does not make men better or happier. But whereas happiness through asceticism and privation is an individual ideal for certain members of the élite who are devoted to a great cause, it is nevertheless true that hundreds of millions of men aspire to be freed from hunger, sickness, ignorance and misery.

The assistance given can only be fully successful if it is not confined to technical aid, but also pervaded by a soul. What matters is not only the number of hospitals and factories built, the number of miles of roads opened up and the nature of the port facilities, but the active and confident collaboration of the peoples concerned in the work which is being carried out.

The development of the less fortunate countries depends rather more on themselves, their own individual efforts, and their desire to progress, than on any aid from outside. There is a difficult task of integration of past and future, and of tradition and evolution; without doubt, this is the most delicate and vital aspect of the help which the more fortunate countries can give to the less fortunate."

#### THE RIGHTS OF THE CHILD

In 1923 Eglantyne Jebb, founder of the Save the Children Fund, drafted a Declaration of the Rights of the Child commonly known as the Declaration of Geneva, which formed the basis of the work of the Save the Children Fund and the Charter of the International Union for Child Welfare. In 1959 the United Nations proclaimed its own fuller Declaration of the Rights of the Child and this was adopted by the Fund in 1963 to avoid the confusion of two charters. Now, fifty years after the drafting of the original charter, Dr. Clair Isbister, Consultant Paediatrician at the Royal North Shore Hospital, St Leonards, New South Wales, Australia, asks for greater awareness of the needs of children today and the situations that will endanger them. We reproduce a portion of an address she gave at the National Council of Women of New South Wales.<sup>1</sup>

There are great problems in our society today that are beyond the capacity of parents and some of these problems are being permitted and even created by academic experts, governments and fanatic, selfish minorities who are not giving adequate consideration to the rights of children. Children have no votes and cannot speak for themselves. I hope to make you think about some of the unjust things we are doing to them, and of the parents and children who are in what we may call "high risk" situations...

... We cannot see what the future holds for our children, but we can give them the benefit of our knowledge, we can show them the family patterns that have worked successfully and joyfully, we can tell them of our successful experiences and show them what is worth saving from the past. There is no turning back the clock, men and women must soon now be treated as of equal importance in the community and they must take equal responsibility. But I am thoroughly tired of hearing those who have failed at marriage trying to throw out the good with the bad. Let us look at the Rights of Children and put their needs first.

<sup>&</sup>lt;sup>1</sup> The World's Children, December 1973.

#### ACCIDENTS IN THE SOCIAL CONTEXT

Jacques Parisot was one of the leaders of the social movement in the west in the period following the Second World War. While his work was more particularly connected with urbanization and automation, he made a major contribution to advances in social medicine and welfare. To perpetuate his memory, the Foundation which bears his name arranges for special lectures on scientific subjects during sessions of the World Health Assembly. The fifth lecture, delivered in Geneva last May by Professor M. V. Volkov, Chairman of the Scientific Council of the Ministry of Health of the USSR, dealt with one of the most important problems of modern life: accidents, their prevention and treatment.

Many National Societies concern themselves with these matters of accident prevention and first aid, publishing posters and instructive articles in their reviews, providing first aid on the highway in some areas, setting up first-aid stations in factories or helping in treatment and rehabilitation. We therefore consider it worth while to reproduce here some of Professor Volkov's remarks. After reviewing the problem from a very general standpoint, he describes the work done in the USSR in accident prevention and in the treatment of injuries and other sequelae of accidents, and the interest shown by the USSR Alliance of Red Cross and Red Crescent Societies in sickness and accident prevention. In a statement published on the occasion of its 50th anniversary last year,2 the Alliance describes the invaluable help given by many voluntary workers to public health authorities in country-wide accident prevention and health protection programmes, and mentions the work of the volunteers in setting up first-aid stations and forming teams able to deal with emergencies. (Ed.).

<sup>&</sup>lt;sup>1</sup> See WHO Chronicle, Geneva, 7-8, July-August 1973.

<sup>&</sup>lt;sup>2</sup> See International Review, July 1973.

...The question of accidents cannot be dissociated from the complex social processes taking place in the modern world. Thus, in order to understand the causes of certain high accident rates and, more important, to attempt to forecast them, we must have a clear idea of the main features of those social and economic changes. Only then will it become clear how important the problem of accidents and accident control is for the whole of humanity, even discounting injuries received in wartime.

The most characteristic feature of modern society is the tremendous technical progress being made. This is accompanied not only by immense benefits making for the physical and spiritual improvement of mankind, but also by a number of definite threats to health and to human life itself. I have in mind pollution of the human environment, nervous and emotional stress, and other factors increasingly associated with industrialization and urbanization.

Turning next to the problem of road accidents, Professor Volkov went on to say:

Because of the large number of victims, traffic accidents are a source of widespread concern. In 1899 a single case of death from a motor accident was reported in the USA. In the same country over 4 million people were involved in traffic accidents in 1972, and 56,300 of them died (figures of the National Road Safety Council, 19 February 1973). In recent years the rates per 100,000 population for persons injured in traffic accidents were more than 550 in Denmark (with more than 20 deaths per 100,000), almost 350 (20 deaths per 100,000) in Finland, over 330 in Iceland, over 300 in Norway, and over 300 in Sweden.

At a world congress held in Paris in 1972 to study the provision of medical services in traffic accidents, very high fatality rates were reported, in terms both of number of cars and of carmiles. According to WHO calculations, more than 10 million people are injured on the roads each year and there are 250,000 deaths. This problem has been discussed on numerous occasions. An international seminar on the epidemiology and prevention of traffic accidents was held in Alexandria, a meeting on the organization of

resuscitation and first-aid services was convened in Leningrad, and a symposium on human factors in road accidents met in Riga. The problem has attained such dimensions that something must be done to stop this haemorrhage of human lives.

He then gave attention to the analysis of accidents in general, with particular reference to the USSR:

...The Soviet Government pays particular attention to the problem of reducing accidents. This has been reflected in the decisions of the Twenty-fourth Congress of the Communist Party of the Soviet Union, the Party's programme, and health legislation.

As long ago as 1919 a decree of the Soviet Government led to the establishment in Moscow of the first Soviet medical first-aid station, which was attached to the Sermet'ev Hospital. A Central Institute for Research on Traumatology and Orthopaedics was set up in Moscow in 1921, and the Sklifosovskij First Aid Institute was created in 1923. Thus, the establishment and development of our specialty go back to the first years of existence of our Soviet State. Many large specialized traumatological establishments have now been set up in the USSR, including 20 research institutes and 85 departments in institutes and universities. Each town has an orthopaedic and accident department, and there are several specialized departments in every large town. In 1970 the Supreme Soviet adopted a single body of labour laws applicable to the whole Soviet Union.

Accident rates in the Soviet Union, particularly those for industrial accidents, have declined steadily. Thus in the last four years alone industrial accidents have decreased by 35%. In the last 40 years the rate has decreased more than threefold. There are branches of industry where industrial accidents have been reduced to a minimum—for example, in the oil industry the complete elimination of accidents at work is now quite feasible.

Domestic accidents are the commonest non-industrial accidents (64.8%). A certain number of non-industrial accidents still occur as a result of the consumption of alcohol. The situation is complicated still further by the fact that most of those who suffer injury are persons in the most active age groups (26-45 years).

Unfortunately the level of accidents among children is quite high, amounting to as much as 22% of all non-industrial accidents. Accidental injury is the most important cause of death in the age group 3-14 years. We are continuing to make every effort to find ways of dealing with this situation.

Soviet traumatologists are faced with two main prophylactic problems:

- (1) the prevention of all types of accident; and
- (2) the prevention of sequelae by means of the treatment and rehabilitation of persons who have suffered injury (improvement in the standard of treatment with a resultant reduction in the hospital case-fatality rate, the disability rate, and the duration of temporary incapacity for work).

In trying to solve the problem of preventing injury, traumatologists work hand in hand with specialists, particularly those concerned with social hygiene, public health administrators, the doctors in health posts, the staff of sanitation and epidemiological services, and the Institute of Health Education. At the same time considerable importance is attached to the role of engineering and technical staff as regards both the design of technical safety devices and the organization of direct prevention, particularly in industrial enterprises, which are required by regulations to have engineering sections dealing with safety techniques. In addition the trade union organizations play an active part in the prevention of accidents. The department for traffic regulation of the Ministry of the Interior devotes much attention to the accident prevention campaign. As for the extremely important question of accident prevenion among children, part of the responsibility must undoubtedly lie with the education authorities. Medical workers are also required to keep careful records of injuries and to carry out analyses of accidents from the public health standpoint.

Thus, in addition to traumatologists, a wide range of specialists both within and outside the public health system are concerned with the problem of accident prevention. Organizations working in this field include public bodies, especially the trade unions, and also the Alliance of Red Cross and Red Crescent Societies of

the USSR, the Volunteer Association for Aid to the Army, Air Force and Navy, and the Life-Saving Association.

... In conclusion I wish to emphasize that the origins of injury are closely linked with social problems and technical progress. The factors I have in view are the position of man in his environment, his psychological condition, his preoccupation with personal and social problems, the mental and physical stress to which he is subjected (which lead to overfatigue and a weakening of concentration and control), the poisoning of the organism with products of environmental pollution, drug dependence, alcoholism, smoking, and finally the problems of urban overpopulation, the sharp rise in the number of motor vehicles, the introduction of ever newer techniques in industry and in the home, and the excessive increase in the speed of means of communication and the general tempo of life, particularly in towns. These are some of the questions that are connected in greater or lesser degree with the accident problem. These problems obviously cannot be solved by traumatologists and orthopaedists on their own. They are State and intergovernmental problems; they involve aspects of social life and they must be solved in co-operation with the educational authorities, the bodies responsible for public order, the social insurance system, and the branches of the civil service responsible for transport, communications, and production.

#### BOOKS AND REVIEWS

#### BEITRÄGE ZUR WEITERENTWICKLUNG DES HUMANITÄREN VÖLKERRECHTS FÜR BEWAFFNETE KONFLIKTE<sup>1</sup>

Under a title which may be translated as "Contributions to the Development of International Humanitarian Law in Armed Conflicts", the Institute of International Law of Kiel University, in August 1973, issued a publication containing papers by Fleck, Bothe, Hailbronner and Ipsen, on specific problems relating to the development of international humanitarian law applicable in armed conflicts.

Dr. Dieter Fleck, Senior Adviser to the Federal Ministry of Defence and the author of an article on "The Employment of Legal Advisers and Teachers of Law in the Armed Forces" published in the April 1973 issue of the International Review, here deals with two different subjects. One of them concerns the *de lege ferenda* distinction which must be made between "ruses of war" and "unlawful perfidy"; the other deals with the prohibition, under international public law, to use specific weapons. The writer's purpose is to pinpoint the reasons and factors that determine the prohibition of certain weapons, bearing in mind the problems this may involve. He suggests that these complex subjects should be approached thus:

- (a) first, by interpreting the existing rules of international law regarding the prohibition of certain weapons;
- (b) secondly, by considering the possible effects of the principle that a Party to the conflict has not an unlimited right to the choice of the means of combat:
- (c) lastly, by drawing therefrom conclusions regarding the application and prohibition of some specific weapons the use of which is generally subject to dispute.

<sup>&</sup>lt;sup>1</sup> Hansischer Gildenverlag, Joachim Heitmann, Hamburg, 1973.

Dr. Michael Bothe, privat-docent at the Max Planck Institute, Heidelberg, analyses "the legal problems of relief operations for the civilian population in case of armed conflict".

Dr. Kay Hailbronner, reader at the same institute, considers the question of protection for airmen in distress, under the law of war, and puts forward solutions to questions left open by Article 36 of Protocol I, which was submitted to the second session of the Conference of Government Experts convened by the ICRC.

Lastly, Dr. Knut Ipsen, lecturer at the Institute of International Law of Kiel University, deals with the urgent and vital problem of open cities and zones under special protection. The writer's interpretation of Article 25 of the Hague Regulations leads to the conclusion that siege rather than attack is prohibited, and that the practice which arose during the Second World War of declaring undefended towns "open cities" would in no way have changed that meaning. Basing himself on this interpretation, he suggests that the two draft articles submitted to the second Conference of Government Experts, namely Article 53 (non-defended localities) and Article 54 (neutralized localities) be merged into a single provision which would further develop the idea embodied in Article 15 of the Fourth Geneva Convention (neutralized zones). Instead of non-defended localities, the writer puts forward the criterion of demilitarization and argues that in modern mobile warfare it would be very difficult to define and recognize what is prohibited and what is not.

These well documented papers will beyond a doubt give rise to further discussion regarding the development of international humanitarian law.

B. H.

#### RENÉ CASSIN: «LA PENSÉE ET L'ACTION» 1

René Cassin was one of the principal architects of the Universal Declaration of Human Rights and, in 1968, was awarded the Nobel Peace Prize by the Norwegian Parliament. This book is a tribute to

a man who, to use the words of Alfred Kastler, himself a Nobel Prize winner, "drew attention to the immense problems whose solution was bound up with the future of mankind", but who counted more than anything else "on the part which education could play in developing feelings of human solidarity in children".

This illustrated book of some 300 pages is divided into two parts. One contains several important papers written by René Cassin, and the other, commendatory statements by outstanding figures, who remind the reader of the faith in human beings which the eminent jurist and professor of international law unceasingly affirmed. The Universal Declaration provided evidence of that faith. We should like to quote a few sentences which René Cassin wrote on the subject, for one of the book's merits lies in the fact that it allows us once again to read the splendid address he delivered at Oslo when presented with the Nobel Prize:

"...Up to 1940, the human community's collective effort for human rights was directed at fighting the scourge of slavery and the traffic in slaves. Humanitarian conventions ranged from the Charter of the International Red Cross, in 1864, to the Hague Conventions on the law of war. To that nucleus were added conventions related to communicable diseases or the prevention of the production of counterfeit money, the arms traffic, the traffic in women, and later on terrorism....

... The Commission, originally composed of eighteen members of different nationalities and occupations, acted correctly in deciding to draw up, in the first place, an international Declaration which would be in the nature of a manifesto by organized mankind. In less than a year and a half the Commission prepared a draft which was submitted to the General Assembly and which, after high-minded and sometimes passionate debates held at a hundred sittings, was adopted with its thirty articles on 10 December 1948.

The very existence of the Declaration, which was henceforth to be called "Universal" and which was not of a mandatory legal nature, was a historic event. It was the first ethical monument ever adopted by organized mankind, at a time when man's powers over nature were

<sup>&</sup>lt;sup>1</sup> Editions F. Lalou, 92.100 Boulogne-sur-Seine, 1972.

greatly increased by scientific discoveries and it was necessary to see to what constructive task those powers could be directed. Morally and politically it had a marked effect. Six of the eight States which abstained when the Declaration was put to the vote, as against forty-eight for, now refer to the Declaration as if they had voted for it. All other States recently admitted to the United Nations have endorsed the Declaration, even where they have not introduced parts of it into their Constitution...".

J.-G. L.

Alone in the Crowd, by A. Querido, World Health, Geneva, July-August 1973.

... People who at present call the city un-livable-in are not among the most vulnerable members of the city population, on the contrary they are often very mature persons with a strong sense of identity.

When we observe in what way they try to find a solution for their problem we see that they seek to establish solitude, either within or without the city. Solitude, as opposed to loneliness, solitude which enables the individual to be himself, logically implying relations to others, since without these relations the individual is nothing.

This behaviour of a certain type of modern city dweller seems to underline some fundamental mental hygiene principles. The crowd is deadly—against the crowd only one remedy exists—the consciousness of identity.

Therefore, whatever the authorities do in grappling with the modern city-monster; whatever the planners may dream about the city of the future; whatever the traffic experts may design and the engineers put on their drawing-boards—let there be at the centre of their efforts one purpose: to respect the individual.

Only then can the megalopolis be prevented from becoming a tyrannopolis, as Lewis Mumford said, in which a bright new world of robots can exist in a pseudo-life only.

# THREE RECENT ICRC PUBLICATIONS ISSUED FOR THE DIPLOMATIC CONFERENCE ON THE REAFFIRMATION AND DEVELOPMENT OF INTERNATIONAL HUMANITARIAN LAW APPLICABLE IN ARMED CONFLICTS

Draft	Additional	<b>Protocols</b>	to the	Geneva	<b>Conventions</b>	of
August	12, 1949					

Geneva, 1973; 8vo, 46 pp. . . . . . . . . . . Sw. Fr. 10.—

## Draft Additional Protocols to the Geneva Conventions of August 12, 1949

#### **Commentary**

Geneva, 1973; 8vo, 176 pp. . . . . . . . . . . . Sw. Fr. 20.—

## Weapons that may cause Unnecessary Suffering or have Indiscriminate Effects

Report on the Work of Experts

Geneva, 1973, 72 pp. Sw. Fr. 12.—

#### EXTRACT FROM THE STATUTES OF THE INTERNATIONAL COMMITTEE OF THE RED CROSS

#### ADOPTED 21 JUNE 1973

#### ART. 1. — International Committee of the Red Cross

- 1. The International Committee of the Red Cross (ICRC), founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.
  - 2. It shall be a constituent part of the International Red Cross.<sup>1</sup>

#### ART. 2. — Legal Status

As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

#### ART. 3. — Headquarters and Emblem

The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be *Inter arma caritas*.

#### ART. 4. — Role

- 1. The special role of the ICRC shall be:
- (a) to maintain the fundamental principles of the Red Cross as proclaimed by the XXth International Conference of the Red Cross;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition;
- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions;

<sup>&</sup>lt;sup>1</sup> The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term "National Red Cross Societies" includes the Red Crescent Societies and the Red Lion and Sun Society.

- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties;
- (e) to ensure the operation of the Central Information Agencies provided for in the Geneva Conventions;
- (f) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in co-operation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities;
- (g) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension;
- (h) to accept the mandates entrusted to it by the International Conferences of the Red Cross.
- 2. The ICRC may also take any humanitarian initiative which comes within its role as a specifically neutral and independent institution and consider any question requiring examination by such an institution.

#### ART. 6 (first paragraph). — Membership of the ICRC

The ICRC shall co-opt its members from among Swiss citizens. It shall comprise fifteen to twenty-five members.



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- ALBANIA Albanian Red Cross, 35, Rruga e Barrikadavet, Tirana.
- ALGERIA -- Central Committee of the Algerian Red Crescent Society, 15 bis, Boulevard Mohamed V, Algiers.
- ARGENTINA Argentine Red Cross, H. Yrigoyen 2068, Buenos Aires.
- AUSTRALIA Australian Red Cross, 122-128 Flinders Street, Melbourne 3000.
- AUSTRIA Austrian Red Cross, 3 Gusshausstrasse, Postfach 39, Vienna 4.
- BAHRAIN Bahrain Red Crescent Society, P.O. Box 882, Manama.
- BANGLADESH Bangladesh Red Cross Society, Amin Court Building, Motijheel Commercial Area, Dacca 2.
- BELGIUM Belgian Red Cross, 98 Chaussée
- de Vleurgat, 1050 Brussels.

  BOLIVIA Bolivian Red Cross, Avenida Simôn Bolívar, 1515 (Casilla 741), La Pas.
- BOTSWANA Botswana Red Cross Society, Independence Avenue, P.O. Box 485, Gaborone.
- BRAZIL Brazilian Red Cross, Praca Cruz Vermelha 10-12, Rio de Janeiro.
- BULGARIA Bulgarian Red Cross, 1, Boul. S. S. Biruzov, Sofia 27.
- BURMA (Socialist Republic of the Union of) -Burma Red Cross, 42 Strand Road, Red Cross Building, Rangoon.
- BURUNDI Red Cross Society of Burundi, rue du Marché 3, P.O. Box 324, Bujumbura.
- CAMEROON Central Committee of the Cameroon Red Cross Society, rue Henry-Dunant, P.O.B. 631, Yaoundé.
- CANADA Canadian Red Cross, 95 Wellesley Street East, Toronto, Ontario, M4Y 1H6.
- CENTRAL AFRICAN REPUBLIC Central African Red Cross, avenue Mobutu, B.P. 1428, Bangui.
- CHILE Chilean Red Cross, Avenida Santa María 0150, Correo 21, Casilla 246V., Santiago de Chile.
- CHINA Red Cross Society of China, 22 Kanmien Hutung, Peking, E.
- COLOMBIA Colombian Red Cross, Carrera 7a, 34-65, Apartado nacional 1110, Bogotá D.E.
- COSTA RICA Costa Rican Red Cross, Calle 5a, Apartado 1025, San José. CUBA — Cuban Red Cross, Calle 23 201 esq.
- N. Vedado, Havana.
- CZECHOSLOVAKIA Czechoslovak Cross, Thunovska 18, Prague I.
- DAHOMEY Red Cross Society of Dahomey, P.O. Box 1, Porto Novo.
- DENMARK Danish Red Cross, Ny Vestergade 17, DK-1471 Copenhagen K.
- DOMINICAN REPUBLIC Dominican Red Cross, Calle Juan Enrique Dunant, Ensanche Miraflores, Apartado Postal 1293, Santo Do-
- ECUADOR Ecuadorian Red Cross, Calle de la Cruz Roja y Avenida Colombia 118, Quito.
- EGYPT (Arab Republic of) Egyptian Red Crescent Society, 34 rue Ramses, Cairo.
- EL SALVADOR El Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, San Salvador.

- ETHIOPIA Ethiopian Red Cross, Red Cross Road No. 1, P.O. Box 195, Addis Ababa.
- FIJI Fiji Red Cross Society, 193 Rodwell Road, P.O. Box 569, Suva.
- FINLAND Finnish Red Cross, Tehtaankatu 1 A, Box 14168, 00141 Helsinki 14.
- FRANCE French Red Cross, 17, rue Quentin Bauchart, F-75384 Paris, cedex 08.
- GERMAN DEMOCRATIC REPUBLIC German Red Cross of the German Democratic Republic, Kaitzerstrasse 2, DDR 801 Dresden 1.
- GERMANY, FEDERAL REPUBLIC OF -German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, 5300, Bonn 1, Postfach (D.B.R.).
- GHANA Ghana Red Cross, National Headquarters, Ministries Annex A3, P.O. Box 835,  $\bar{A}ccra.$
- GREECE Hellenic Red Cross, rue Lycavittou 1, Athens 135.
- GUATEMALA Guatemalan Red Cross, 3ª Calle 8-40, Zona 1, Ciudad de Guatemala.
- GUYANA Guyana Red Cross, P.O. Box 351, Eve Leary, Georgetown.
- HAITI Haiti Red Cross, Place des Nations Unies, B.P. 1337, Port-au-Prince.
- HONDURAS Honduran Red Cross, 1ª Avenida entre 3a y 4a Calles, Nº 313, Comayagüela, D.C.
- HUNGARY Hungarian Red Cross, V. Arany János utca 31, Budapest V. Mail Add.: 1367 Budapest 5, Pf. 249.
- ICELAND Icelandic Red Cross, Øldugøtu 4, Post Box 872, Reykjavik.
- INDIA Indian Red Cross, 1 Red Cross Road, New Delhi 1.
- INDONESIA Indonesian Red Cross, Djalan Abdul Muis 66, P.O. Box 2009, Djakarta.
- IRAN Iranian Red Lion and Sun Society, Av. Villa, Carrefour Takhté Djamchid, Teheran.
- IRAO Iraqi Red Crescent, Al-Mansour, Baghdad.
- IRELÂND -Irish Red Cross, 16 Merrion Square, Dublin 2.
- ITALY Italian Red Cross, 12 via Toscana, Rome.
- IVORY COAST Ivory Coast Red Cross Society, B.P. 2645, Abidjan.
- JAMAICA Jamaica Red Cross Society, 76 Arnold Road, Kingston 5.
- JAPAN Japanese Red Cross, 1-1-5 Shiba Daimon, Minato-Ku, Tokyo 105.
- JORDAN Jordan National Red Crescent Society, P.O. Box 10 001, Amman.
- KENYA Kenya Red Cross Society, St John's Gate, P.O. Box 40712, Nairobi.
- KHMER REPUBLIC Khmer Red Cross, 17 Vithei Croix-Rouge khmère, P.O.B. 94, Phnom-Penh.
- KOREA DEMOCRATIC PEOPLE'S REPUBLIC OF Red Cross Society of the Democratic People's Republic of Korea, Pyongyang.
- KOREA, REPUBLIC OF The Republic of Korea National Red Cross, 32-3Ka Nam San-Dong, Seoul.
- KUWAIT Kuwait Red Crescent Society, P.O. Box 1359, Kuwait.
- LAOS Lao Red Cross, P.B. 650, Vientiane.

- LEBANON Lebanese Red Cross, rue Général-Spears, Beirut.
- LESOTHO Lesotho Red Cross Society, P.O. Box 366, Maseru.
- LIBERIA Liberian National Red Cross, National Headquarters, 107 Lynch Street, P.O. Box 226, Monrovia.
- LIBYAN ARAB REPUBLIC Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, Benghazi.
- LIECHTENSTEIN Liechtenstein Red Cross, FL-9490 Vaduz.
- LUXEMBOURG Luxembourg Red Cross, Parc de la Ville, C.P. 1806, Luxembourg.
- MALAGASY REPUBLIC Red Cross Society of the Malagasy Republic, rue Clemenceau, P.O. Box 1168, Tananarive.
- MALAWI Malawi Red Cross, Hall Road, Blantyre (P.O. Box 30080, Chichiri, Blantyre 3).
- MALAYSIA Malaysian Red Cross Society, 519 Jalan Belfield, Kuala Lumpur.
- MALI Mali Red Cross, B.P. 280, route de Koulikora, Bamako.
- MAURITANIA Mauritanian Red Crescent Society, B.P. 344, Avenue Jamal Abdel Nasser, *Nouakchott*.
- MEXICO Mexican Red Cross, Avenida Ejército Nacional nº 1032, México 10 D.F.
- MONACO Red Cross of Monaco, 27 boul. de Suisse, *Monte Carlo*.
- MONGOLIA Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, Ulan Bator.
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- SRI LANKA Sri Lanka Red Cross Society, 106 Dharmapala Mawatha, Colombo 7.
- SUDAN Sudanese Red Crescent, P.O. Box 235, Khartoum.
- SWEDEN Swedish Red Cross, Artillerigatan 6, S-114 51, Stockholm 14.
- SWITZERLAND Swiss Red Cross, Taubenstrasse 8, B.P. 2699, 3001 Berne.
- SYRIA (Syrian Arab Rep.) Syrian Red Crescent, Bd Mahdi Ben Barake, Damascus.
- TANZANIA Tanzania Red Cross Society, Upanga Road, P.O.B. 1133, Dar es Salaam.
- THAILAND Thai Red Cross Society, Paribatra Building, Chulalongkorn Memorial Hospital, Bangkok.
- TOGO Togolese Red Cross Society, 51, rue Boko Soga, P.O. Box 655, Lomé.
- TRINIDAD AND TOBAGO Trinidad and Tobago Red Cross Society, Regional Community Park, Wrightson Road Extension, P.O. Box 357, Port of Spain, Trinidad, West Indies.
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- TURKEY Turkish Red Crescent, Yenisehir, Ankara.
- UGANDA Uganda Red Cross, Nabunya Road, P.O. Box 494, Kampala.
- UNITED KINGDOM British Red Cross, 9 Grosvenor Crescent, London, S.W.1X 7EJ.
- UPPER VOLTA Upper Volta Red Cross, P.O.B. 340, Ouagadougou.
- URUGUAY Uruguayan Red Cross, Avenida 8 de Octubre 2990, Montevideo.
- U.S.A. American National Red Cross, 17th and D Streets, N.W., Washington, D.C. 20006.
- U.S.S.R. Alliance of Red Cross and Red Crescent Societies, Tcheremushki, I. Tcheremushkinskii proezd 5, Moscow B-36.
- VENEZUELA Venezuelan Red Cross, Avenida Andrés Bello No. 4, Apart. 3185, Caracas.
- VIET NAM, DEMOCRATIC REPUBLIC OF— Red Cross of the Democratic Republic of Viet Nam, 68 rue Bà-Trièu, *Hanoi*.
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